

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS664HOS	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/03/2009
NAME OF PROVIDER OR SUPPLIER KINDRED HOSPITAL LAS VEGAS		STREET ADDRESS, CITY, STATE, ZIP CODE 5110 W SAHARA AVE LAS VEGAS, NV 89146		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>Initial Comments</p> <p>Surveyor: 26855 This Statement of Deficiencies was generated as a result of a State Licensure focused survey conducted in your facility on 12/01/09 and finalized on 12/03/09, in accordance with Nevada Administrative Code, Chapter 449, Hospitals.</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>The following deficiencies were identified.</p>	S 000		
S 105 SS=E	<p>NAC 449.322 Housekeeping Services</p> <p>1. A hospital shall establish organized housekeeping services planned, operated and maintained to provide a pleasant, safe and sanitary environment. Adequate personnel, using accepted practices and procedures, shall keep the hospital free from offensive odors, accumulations of dirt, rubbish, dust and safety hazards.</p> <p>This Regulation is not met as evidenced by: Surveyor: 26855</p>	S 105		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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S 105	Continued From page 1 Based on observation, interview and housekeeping policy and procedure review, the facility failed to provide a safe and sanitary environment and keep hospital patient rooms and bathrooms free from an accumulation of dust, dirt, rubbish, trash and safety hazards. Severity: 2 Scope: 2	S 105		
S 106 SS=D	NAC 449.322 Housekeeping Services 2. Suitable equipment and supplies must be provided for cleaning all surfaces. The equipment must be maintained in a safe, sanitary condition. Storage areas, attics and cellars must be kept safe and free from accumulations of extraneous materials such as refuse, discarded furniture and equipment, and old newspapers. Combustibles such as cleaning rags and compounds and hazardous substances must be labeled properly and stored in safe places. Paper towels, tissues and similar supplies must be stored in a manner to prevent their contamination before use. This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation, interview and housekeeping policy and procedure review the facility failed to ensure housekeeping storage areas and equipment used to dispense disinfectant solutions were operating safely and kept free from an accumulation of dust, lint, dirt and trash to prevent contamination. Severity: 2 Scope: 1	S 106		
S 107 SS=E	NAC 449.322 Housekeeping Services 3. Cleaning must be performed in a manner to minimize the spread of pathogenic organisms.	S 107		

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S 107	Continued From page 2 Floors must be cleaned regularly. Polishes on floors must provide a nonslip finish. Throw or scatter rugs must not be used except for nonslip entrance mats. This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation, interview and housekeeping policy and procedure review the facility failed to ensure patient rooms and bathroom floors were regularly cleaned and free from dirt, grime, stains, dust, trash and rubbish. Severity: 2 Scope: 2	S 107		
S 156 SS=D	NAC 449.332 Discharge Planning 14. If identified in a discharge plan, referral of a patient to outpatient services or transfer of the patient to another facility must be accomplished in a manner that meets the the identified needs of the patient, including the sharing of necessary medical information about the patient with the receiving service or facility. This Regulation is not met as evidenced by: Surveyor: 26855 Based on record review and document review, the facility failed to follow facility transfer policy and procedure and complete transfer documentation on a patient to ensure necessary medical information about a patient transferred to hospice was provided to the receiving facility. Severity: 2 Scope: 1	S 156		
S 201 SS=D	NAC 449.3395 Sanitary Conditions and Supplies for Food 1. A hospital shall store, prepare, distribute and serve food under sanitary conditions.	S 201		

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S 201	Continued From page 3 This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation and interview the facility failed to ensure food stored in dry storage and meat products were properly labeled and dated. Severity: 2 Scope: 1	S 201		
S 205 SS=D	NAC 449.3395 Sanitary Conditions - Supplies for Food 3. All kitchens and kitchen areas in a hospital must be kept clean, kept free from litter and rubbish, and protected from rodents, roaches, flies and other insects. The hospital shall take such measures as are necessary for preventive pest control. All utensils, counters, shelves and equipment must be kept clean, maintained in good repair, and free from breaks, corrosions, open seams, cracks and chipped areas. Plastic ware, china and glassware that is unsightly, unsanitary or hazardous because of chips, cracks or loss of glaze must be discarded. This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation and interview the facility failed to ensure kitchen and cafeteria floors were kept clean and free from dirt, grime and grease. Severity: 2 Scope: 1	S 205		
S 207 SS=D	NAC 449.3395 Sanitary Conditions - Supplies for Food 5. Kitchen sinks must not be used for washing hands. Separate facilities for washing hands, which includes soap, running water and individual towels, must be provided. This Regulation is not met as evidenced by:	S 207		

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S 207	Continued From page 4 Surveyor: 26855 Based on observation and interview the facility failed to ensure separate facilities for handwashing or functioning hand sanitizer dispensers were located on the serving line for proper hand hygiene. Severity: 2 Scope: 1	S 207		
S 216 SS=D	NAC 449.340 Pharmaceutical Services 2. The pharmacy and area for drug storage must be administered in accordance with all applicable state and federal laws. This Regulation is not met as evidenced by: Surveyor: 26855 Based on observation, interview and medication storage policy and procedure review, the facility failed to ensure expired medications were not kept in stock. Severity; 2 Scope: 1	S 216		
S 300 SS=E	NAC 449.3622 Appropriate Care of Patient 1. Each patient must receive, and the hospital shall provide or arrange for, individualized care, treatment and rehabilitation based on the assessment of the patient that is appropriate to the needs of the patient and the severity of the disease, condition, impairment or disability from which the patient is suffering. This Regulation is not met as evidenced by: Surveyor: 27286 Based on record review, and document review,	S 300		

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S 300	Continued From page 5 the facility failed to ensure that 7 of 18 patients received the individualized care and treatment for wound care as indicated in their records. (Patient #1; #2; #3; #4; #5; #7; and #8)	S 300		
S 310 SS=D	NAC 449.3624 Assessment of Patient 1. To provide a patient with the appropriate care at the time that the care is needed, the needs of the patient must be assessed continually by qualified hospital personnel throughout the patient's contact with the hospital. The assessment must be comprehensive and accurate as related to the condition of the patient. This Regulation is not met as evidenced by: Surveyor: 27286 Based on interview, record review and document review the facility failed to provide a patient with the appropriate wound assessment and care and failed to continually make a comprehensive and accurate assessment of the condition of the patients wounds and implement nursing interventions per facility wound care policy and procedure. (Patient # 6)	S 310		
S 325 SS=E	NAC 449.3628 Physical Restraint Use 5. The governing body shall ensure that the use of any physical restraints on a patient is initiated only pursuant to a physician's order or protocols approved by the medical staff and the hospital administration. This Regulation is not met as evidenced by: Surveyor: 27286 Based on observation, record review and document review, the facility failed to follow the	S 325		

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S 325	Continued From page 6 physician orders for restraints for 4 of 18 patients. (Patients #1; #2; #3 and #4)	S 325		
S 340 SS=D	NAC 449.363 Personel Policies 5. The hospital shall ensure that the health records of its employees contain documented evidence of surveillance and testing of those employees for tuberculosis in accordance with chapter 441A of NAC. This Regulation is not met as evidenced by: Surveyor: 26855 Based on personnel record review the facility failed to ensure 1 out of 18 employees records contained documented evidence of a pre-employment physical in accordance with chapter 441 A of NAC. (Employee # 11) Severity: 2 Scope: 1	S 340		

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